

Work Order ID 118926

May-06-14 9:59:51 AM

118926

Page 1

Item ID: D4858-1L07 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: Dome Light Housing, Light Grey
 Start Date: 5/05/14 Start Qty: 4.00 ***4*** Cust Item ID:
 Required Date: 5/05/14 Req'd Qty: 4.00 ***4*** Customer:
 Reference:

Approvals: Process Plan: ML5 Date: 1405-06 Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4858	A								
100		0.00							DAS 07 9-89
100						<u>X</u>			
HandThermo	Memo	0.00							14/05/21
Hand Finishing Thermoforming	1-Cut Sheet to required Blank size								
105		0.00							DAS 07 9-89
105	Dry Material					<u>X</u>			
HandThermo	Memo	0.00							14/05/21
Hand Finishing Thermoforming	Dry Sheet as per OSI022 POLYCARBONATE								
	Temp: <u>245 deg. F</u>								
	Time IN: <u>5:00 PM</u>								
	Time OUT: <u>6:00 AM</u>								
	Per: _____								

MAY 21 2014

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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May-06-14 9:59:51 AM

Page 2

[illegible]

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
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FAULT CATEGORY

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May-06-14 9:59:51 AM

1 18926

Page 3

N900040100

Setup Start *NS1*

Item Name: Dome Light Housing, Light Grey

Stop *NS2*

Start Date: 5/05/14 **Start Qty:** 4.00

4

Cust Item ID:

Required Date: 5/05/14 **Req'd Qty:** 4.00

4

Customer:

Reference:

Approvals: _____ **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Run Start *NR1*

QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____

Stop ***NR2***

**Insp.
Stamp**

150 QC2- Inspect parts off machine FAI/FAIB

0.00

150

QC

Memo

0.00

Quality Control

Complete FAI document

**DAS
07
9-89**

14/05/20

160 QC5- Inspect part completeness to step on W/O

0.00

160

QC

Memo

0.00

Quality Control

DAS

127

27
28

0.00

170 Identify as per dwg & Stock Location: ME

0.00

170

Packaging

Memo

0.00

Packaging

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Doc/Data									
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FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Work Order ID 118926

May-06-14 9:59:51 AM

118926

Page 4

Item ID: D4858-1L07

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Dome Light Housing, Light Grey

Start Date: 5/05/14 Start Qty: 4.00

4

Cust Item ID:

Required Date: 5/05/14 Req'd Qty: 4.00

4

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run HoursTool ID Tool # Plan
Code Accept Reject Reject Insp.
Qty Qty Number Stamp

180

QC21- Final Inspection - Work Order Release

0.00

180

QC

Memo

0.00

Quality Control

MLJ 14-05-26MF
14-5-23

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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Picklist Print

May-06-14 8:07:14 AM

Page 1

Work Order ID: 118926

118926

Parent Item: D4858-1L07

D4858-11 07

Parent Item Name: Dome Light Housing, Light Grey

Start Date: 5/05/14

Required Date: 5/05/14

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev. A New Issue 13/09/12 DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.093-F6006-07		Purchased	No			100	sf	1,839.340	1.77	7.452632			DAS 07 9-89
MI FXS 093-F6006-07										**			
GE PLASTICS LEXAN SHEET													

Location	Loc Qty	Loc Code
MAT023	1839.34	
114459	229.26	
123105	38	
124501	543.5	
m128608	858.58	
m129014	170	

~~127708~~
128608.

14/05/14

1058 H.

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

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Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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DART AEROSPACE LTD	Work Order: 118926
Description:	Part Number:
Inspection Dwg: D4858 Rev: A	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST THERMOFORMING SECTION

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than "	✓			
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

Measured by: Dh

Date: 14/05/21

TRIMMING SECTION

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
0.35"		0.375"	✓		Visual	
1.75"		1.80"	✓		"	
2.56"		2.50"	✓		"	
0.201"		0.201"	✓		"	
0.160"		0.159"	✓		"	
0.390"		0.390"	✓		"	
0.060"		0.063"	✓		"	
0.070"		0.073"	✓		"	

Measured by: DAS Dh

Date: 14/05/21

Audited by: 27 G-89

Date: 14/5/22

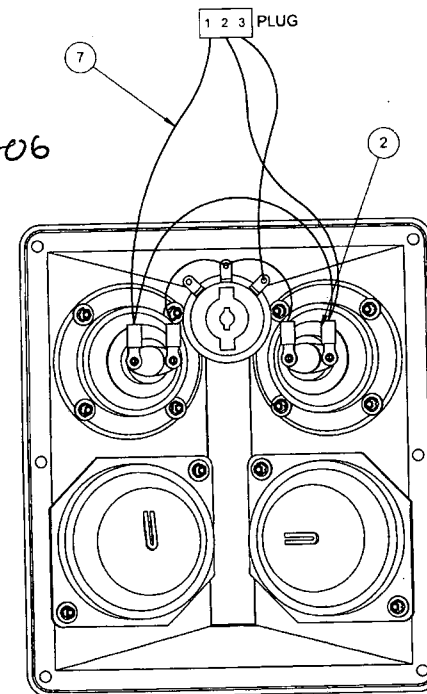
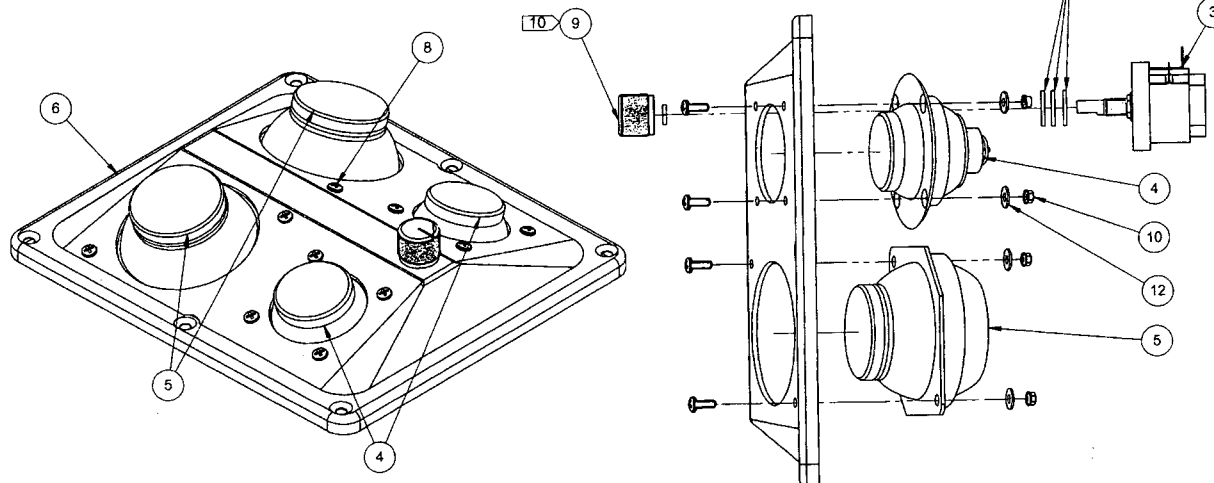
Preliminary Approval: _____

Date: _____

Rev	Date	Change	Revised by	Approved
B	10.04.14	Added preliminary approval	KJ	

10.04.14

ITEM NO.	QTY. -041	PART NUMBER	DESCRIPTION
1	X	D4858-041	DOMELIGHT HOUSING ASSEMBLY
2	4	D4290-21 (REF)	RING TERMINAL (PART OF D4897-041)
3	1	D4864-1 (REF)	RHEOSTAT (PART OF D4897-041)
4	2	D4872-1 (REF)	LIGHT FIXTURE (PART OF D4897-041)
5	2	D4886-1	AIR VENT
6	1	D4858-1	DOMELIGHT HOUSING
7	1	D4897-041	DOMELIGHT WIRING HARNESS
8	12	D4898-1	SCREW
9	1	D4906-1	KNOB
10	12	MS21042L06	NUT
11	3	NAS1149F0663P	WASHER
12	12	NAS1149FN632P	WASHER



D4858-041 DOME LIGHT AIR VENT ASSEMBLY

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.1
- 7) WEIGHT: 1.32 lbs
- 8) REPACES GENEVA P/N G12983 P112-X
- 9) OPTIONAL: USE ADDITIONAL WASHERS TO SHIM AS REQUIRED
- 10) NUT INCLUDED WITH RHEOSTAT

RELEASED
2013-09-16

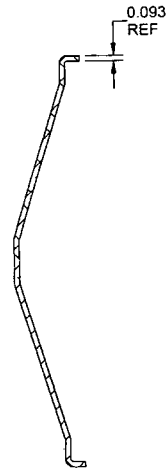
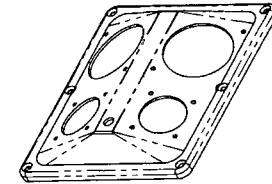
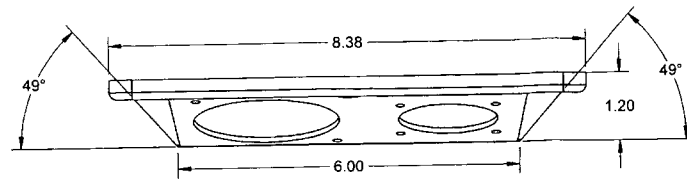
A	NEW ISSUE	13.07.24
REV.	DESCRIPTION	BY DATE
DESIGN	OS	
DRAWN	OS	
CHECKED	DE	
MFG. APPR.	DE	
APPROVED	DE	
DE APPR.	DE	
DATE	13.07.24	

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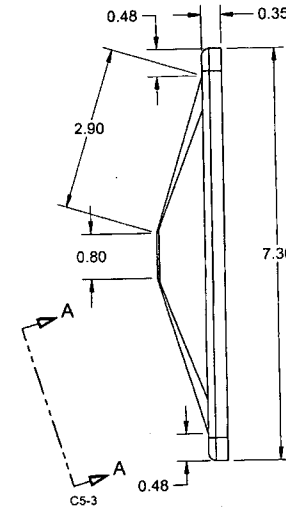
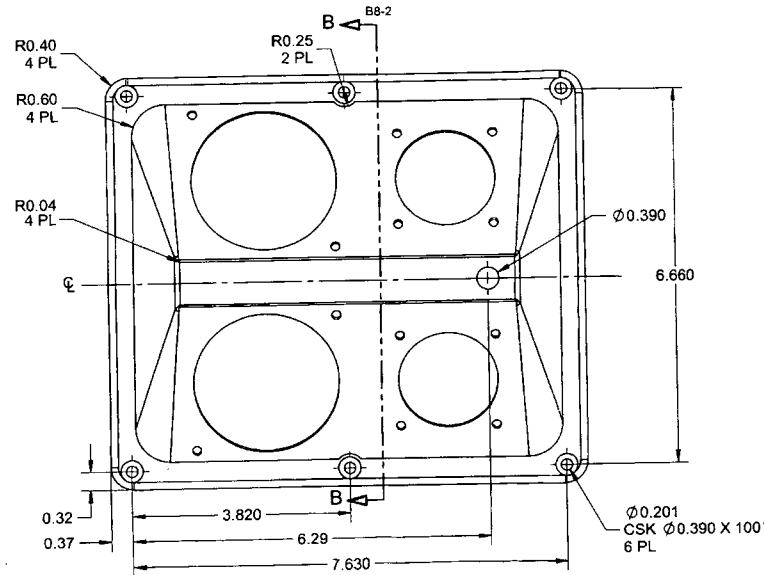
DRAWING NO. **D4858** REV. A
SHEET 1 OF 3

TITLE **DOMELIGHT AIR VENT ASSY** SCALE NTS

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SECTION B-B
B5-2



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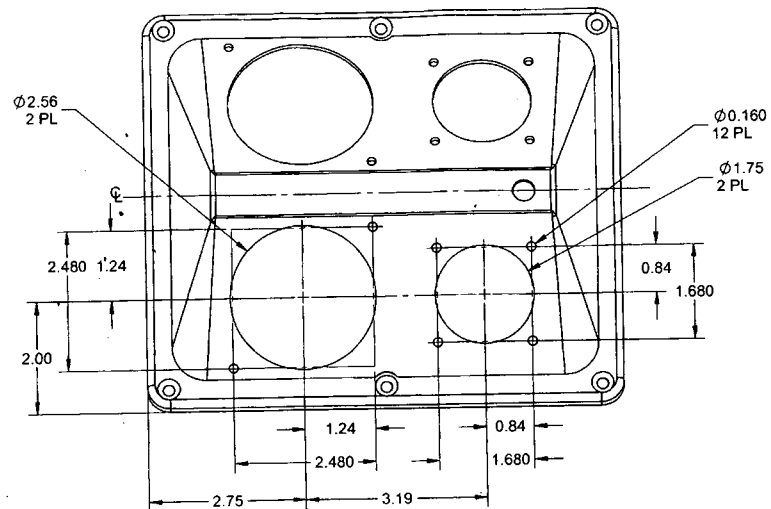
NOTES:

- 1) MATERIAL: SEE TABLE
- 2) TOOLING: THERMOFORM PER MOLD DT9933 PER QSI 022 TRIM PER DT9933
- 3) FINISH: N/A
- 4) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) UNITS: INCHES UNLESS OTHERWISE NOTED
- 6) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 7) IDENTIFICATION: N/A
- 8) WEIGHT: 0.22 lbs
- 9) REPLACES GENEVA P/N G12985
- 10) PART SHAPE AND GEOMETRY IS CONTROLLED BY TOOLING
- 11) MINIMUM THICKNESS AFTER FORMING IS 0.060" FOR FLANGES AND 0.070" ELSEWHERE

D4858-1 DOME LIGHT HOUSING

PART NUMBER	DESCRIPTION
D4858-1LBL	F6006 SUEDE/POLISHED 701 BLACK LEXAN SHEET 0.093 THICK (REF DART SPEC MLEXS.093-F6006-02)
D4858-1LLG	F6006 SUEDE/POLISHED GY5B133 LIGHT GREY LEXAN SHEET 0.093 THICK (REF DART SPEC MLEXS.093-F6006-07)

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		DART AEROSPACE USA, INC. KENT, WA
		DRAWING NO. D4858 REV. A
		SHEET 2 OF 3
		TITLE DOME LIGHT AIR VENT ASSY SCALE NTS
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VIEW A-A
B3-2

RELEASED
2013-09-16
MR

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CHECKED	DC	DRAWING NO. D4858	REV. A
MFG. APPR.	AL	SHEET 3 OF 3	
APPROVED	SH	TITLE	SCALE
DE APPR.	SH	DOM LIGHT AIR VENT ASSY	
DATE	13.07.24	NTS	

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